

9-27-00

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | VT       | 696007 | 7/18/00  |
| O.I.P.E. CLASSIFIER       |          | 49     | 7/25/00  |
| FORMALITY REVIEW          | AA       | 5C 825 | 08/22/00 |
| RESPONSE FORMALITY REVIEW | A M      | 5C 580 | 11-17-00 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 1/12/01 |
| 2              | 2/2/02  |
| 3              | 2/2/02  |
| 4              | 2/2/02  |
| 5              | 2/2/02  |
| 6              | 2/2/02  |
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| Claim          | Date    |
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| Final Original |         |
| 51             | 1/12/01 |
| 52             | 2/2/02  |
| 53             | 2/2/02  |
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| Claim          | Date |
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| Final Original |      |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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